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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	_ Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Samantha First name E Middle name Carrillo Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2869		

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Case number (if known)

Debtor 1 Samantha E Carrillo

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live		If Debtor 2 lives at a different address:		
		9307 Irving Park Rd #11			
		Schiller Park, IL 60176 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Cook			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
bankruptcy		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Document Case number (if known) Debtor 1 Samantha E Carrillo

ar	Tell the Court About	Your B	ankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Req</i> page 1 and check the ap		12(b) for Individuals Fili	ing for Bankruptcy
	choosing to file under	■ Chapter 7						
		☐ Cl	hapter 11					
		☐ CI	hapter 12					
		☐ CI	hapter 13					
3.	How you will pay the fee	_	about how yo	u may pay. Typ attorney is subr	en I file my petition. Plea ically, if you are paying the mitting your payment on y	he fee yourself, you ma	ay pay with cash, cashi	er's check, or money
					allments. If you choose s (Official Form 103A).	this option, sign and at	tach the Application for	r Individuals to Pay
			but is not req	t that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, t required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that by your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out				
					Chapter 7 Filing Fee Wai			
9.	Have you filed for bankruptcy within the	■ No						
	last 8 years?	☐ Ye						
			District		When _			
			District		When _ When		Case number	
			District		vvnen _		Case number	
10.	Are any bankruptcy cases pending or being	■ No)					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	es.					
			Debtor			F	Relationship to you	
			District		When		Case number, if known	
			Debtor				Relationship to you	
			District		When _	(Case number, if known	
11.	Do you rent your residence?	■ No	Go to I	ne 12.				
		☐ Ye	es. Has yo	ur landlord obta	ained an eviction judgme	nt against you and do y	ou want to stay in your	residence?
				No. Go to line	12.			
				Yes. Fill out <i>Ini</i> bankruptcy pet	itial Statement About an l ition.	Eviction Judgment Aga	inst You (Form 101A) a	and file it with this

Document Page 4 of 64 Case number (if known) Debtor 1 Samantha E Carrillo Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety?

Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Samantha E Carrillo

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 64 Case number (if known) Debtor 1 Samantha E Carrillo Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Samantha E Carrillo Signature of Debtor 2 Samantha E Carrillo Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on June 9, 2016

MM / DD / YYYY

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Debtor 1 Samantha E Carrillo Document Page 7 of 64 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Joseph	n R. Doyle	Date	June 9, 2016			
Signature of	f Attorney for Debtor		MM / DD / YYYY			
Joseph R.	. Doyle					
Bizar & Do	oyle, LLC					
	123 West Madison Street					
Chicago, I	IL 60602					
Number, Street,	, City, State & ZIP Code					
Contact phone	312-427-3100	Email address	joe@bizardoylelaw.com			
6279065						
Bar number & S	State					

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Deb	tor 1 Samantha E Carril	llo	7.00	Case number	(if known)
Pari	6: Answer These Questi	ions for R	leporting Purposes		
16.	What kind of debts do you have?	16a.	Are your debts primarily con individual primarily for a persor	sumer debts? Consumer debts are definal, family, or household purpose."	ned in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		iness debts? Business debts are debts tement or through the operation of the busi	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you own	e that are not consumer debts or busines	s debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.	
Do you estimate that after any exempt property is excluded and		Yes.	l am filing under Chapter 7. Do are paid that funds will be avail	you estimate that after any exempt propertiable to distribute to unsecured creditors?	erty is excluded and administrative expenses
	administrative expenses are paid that funds will		■ No	•	
	be available for distribution to unsecured creditors?		☐Yes		
18.	How many Creditors do	1 -49		1 ,000-5,000	1 25,001-50,000
	you estimate that you owe?	☐ 50-99		□ 5001-10,000 □ 10,001,05,000	☐ 50,001-100,000
□ 100-199 □ 10,001-25,000 □ 200-999				□ 10,001-25,000	☐ More than100,000
19.	How much do you	\$ 0 - \$	\$50.000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?	\$50,0	001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion
			,001 - \$500,000 ,001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		— \$000	, cor of minor		
20.	How much do you estimate your liabilities	\$0 - 8	• •	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	to be?		001 - \$100,000 ,001 - \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			,001 - \$500,000 ,001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
Par	t 7: Sign Below				
For	you	I have e	xamined this petition, and I decla	are under penalty of perjury that the inform	nation provided is true and correct.
	•	If I have	chosen to file under Chapter 7, I		under Chapter 7, 11,12, or 13 of title 11,
		If no atto	orney represents me and I did no	t pay or agree to pay someone who is no notice required by 11 U.S.C. § 342(b).	·
		l reques	t relief in accordance with the ch	apter of title 11, United States Code, spe-	cified in this petition.
			tcy case can result in fines up to	concealing property, or obtaining money of \$250,000, or imprisonment for up to 20 y	or property by fraud in connection with a rears, or both. 18 U.S.C. §§ 152, 1341, 1519,
			ntha E Carrillo re of Debtor 1	Signature of Debto	r 2
		Execute	od on $05/02/20$	Executed on	I / DD / WWW

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Debtor 1 Samantha E Carr	illo	Case	Case number (if known)		
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Un	ited States Code, and have e	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter		
If you are not represented by an attorney, you do not need to file this page.	for which the person is eligible. I also certify and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect. Signature of Attorney for Debtor	that I have delivered to the destruction that I have no know	debtor(s) the notice required by 11 U.S.C. § 342(b) reledge after an inquiry that the information in the		
	Joseph R. Doyle Printed name Bizar & Doyle, LLC Firm name				
	123 West Madison Street Suite 205 Chicago, IL 60602 Number, Street, City, State & ZIP Code				
	Contact phone 312-427-3100 6279065 Bar number & State	Email address	joe@bizardoylelaw.com		

Fill in this inform	mation to identify yo	Hr caco:			
Debtor 1	Samantha E Ca		-		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the	NORTHERN DISTRICT	COF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
	· · · · · · · · · · · · · · · · · · ·		n de la companya		amended filing
Official Forn	m 106Dec				
Declarat	ion About	an Individual	Debtor's Sci	hedules	12/15
	8 U.S.C. §§ 152, 1341 n Below	l, 1519, and 3571.			
Did you pa	y or agree to pay so	meone who is NOT an atto	rney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes. N	Name of person				/ Petition Preparer's Notice, Signature (Official Form 119)
	alty of perjury, I declar te true and correct.	are that I have read the sun	nmary and schedules filed	l with this declaration and	I
× AT	marta Z t	nll	X		
	itha É Carrillo		Signature of D	Debtor 2	
Signatu	re of Debtor 1				
Date	05/02/	2016	Date		

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Debtor 1	Samantha E Ca	rrillo	Case number (if known)
			statement, concealing property, or obtaining money or property by fraud in connection 00, or imprisonment for up to 20 years, or both.
18 U.S.C	§§ 152, 1341, 1519,	and 3571.	•
A	mantu 3	= COUTILLO	
	ha E Carrillo		Signature of Debtor 2
Signature	e of Debtor 1	u , , , , , , , , , , , , , , , , , ,	
Date _(05/02/b	1016	Date
Did you at	ttach additional pag	ges to Your Statement of F	Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No			, , , , ,
☐ Yes			
Did you pa	ay or agree to pay s	someone who is not an atto	orney to help you fill out bankruptcy forms?
■ No			
☐ Yes Na	ame of Person	Attach the Rankruptcy Pe	etition Prenarer's Notice Declaration, and Signature (Official Form 119)

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Debtor 1 Samantha E Carrillo	Case number (if known)
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
property that is subject to an unexpired lease.	about any property of my estate that secures a debt and any personal
X AMMAN C COTHEC Samantha E Carrillo	Signature of Debtor 2
Signature of Debtor 1	· · · · · · · · · · · · · · · · · · ·
Date 05/02/2010	Date

		Docume	<u>nt Page 13 of 64</u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Samantha E Carr	illo		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
if known)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	14,880.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	14,880.00
Par	2: Summarize Your Liabilities		
			abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	18,133.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	79,428.00
	Your total liabilities	\$	97,561.00
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	0.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	400.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	edules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a nersonal	family or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

Debtor 1 Samantha E Carrillo Document Page 14 of 64 Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	52,684.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	52,684.00

				Document	Page 15 of 64			
Fill in t	his informa	ation to identify your	case and	I this filing:				
Debtor	1	Samantha E Cari	rillo					
		First Name		ddle Name	Last Name			
Debtor :		First Name	N.4:	ddle Name	Lost Name			
(Spouse, i	ii iiiiig)	riist Name	IVIII	dule Name	Last Name			
United S	States Banl	kruptcy Court for the:	NORTH	ERN DISTRICT OF IL	LINOIS			
Case no	umber							Check if this is an
								amended filing
Offic	ial For	m 106A/B						
			r4.					
		A/B: Prop						12/15
think it fi informati	ts best. Be	as complete and accura space is needed, attach	ate as poss	sible. If two married peo	If an asset fits in more than one ple are filing together, both are the top of any additional pages	equally responsible fo	or supply	ring correct
Part 1:	Describe Ea	ach Residence, Building	g, Land, or	Other Real Estate You	Own or Have an Interest In			
1. Do yo	u own or ha	ve any legal or equitabl	le interest i	n any residence, buildir	ng, land, or similar property?			
.								
_	. Go to Part 2							
⊔ Yes	s. Where is t	he property?						
Part 2:	Describe Yo	our Vehicles						
someone	e else drive		ele, also re	port it on Schedule G:	s, whether they are registers Executory Contracts and Un		,y voluo	oo you oiiii alaa
3.1 N	Make: H	yundai		Who has an interest in	the property? Check one	Do not deduct secure the amount of any se		
N	Model: Tu	ucson		Debtor 1 only		Creditors Who Have		
		012		Debtor 2 only		Current value of the	e Cı	urrent value of the
	Approximate		,000	Debtor 1 and Debtor	•	entire property?	pc	ortion you own?
_	Other informa	ed on NADA clean		☐ At least one of the de	ebtors and another			
1	rade in	ca on NADA cican		☐ Check if this is com	nmunity property	\$14,025.0	0	\$14,025.00
				(see instructions)				
Exam No □ Ye 5 Add	ples: Boats s the dollar	, trailers, motors, pers	onal water	rcraft, fishing vessels,	chicles, other vehicles, and snowmobiles, motorcycle accommobiles, moto	cessories entries for		\$14,025.00
Part 3:	Describe V	our Personal and Hous	ehold Itam	ie.				
				rest in any of the follo	owing items?		Curr	ent value of the
·				, , , , , , , , , , , , , , , , , , , ,	3		port Do n	ion you own? not deduct secured ns or exemptions.
A House	sehold ann	ds and furnishings						

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Dobtor 1	Case 16-19089	Doc 1	Filed 06/09/16 Document	Entered 06/09/16 16:3 Page 16 of 64 Case number	37:08	Desc Main
Debtor 1	Samantha E Carrillo			Case number	(IT KNOWN)	
■ Yes	. Describe					
	Miscell	aneous us	ed household goods	3]	\$500.00
□ No	oles: Televisions and radios; including cell phones, c . Describe	ameras, med	dia players, games	oment; computers, printers, scanners	s; music co	
	MISCEII	aneous ele	ectronics		<u> </u>	\$75.00
Examp □ No	tibles of value bles: Antiques and figurines; other collections, memo			oks, pictures, or other art objects; sta	ımp, coin,	or baseball card collections;
	Miscell	aneous bo	oks, tapes, CD's, etc	. .]	\$20.00
10. Firear Exam No ☐ Yes. 11. Clothe Exam ☐ No	nples: Pistols, rifles, shotguns . Describe					
	Person	al used clo	othing]	\$250.00
☐ No	nples: Everyday jewelry, cost . Describe		engagement rings, wed	ding rings, heirloom jewelry, watches	s, gems, g	old, silver \$10.00
	Wiscen	aneous co.	Stuffie Jewelly		<u> </u>	
Exam No □ Yes. 14. Any o	arm animals nples: Dogs, cats, birds, hors . Describe other personal and househo		u did not already list, i	ncluding any health aids you did n	not list	
■ No □ Yes	. Give specific information					
	the dollar value of all of yo Part 3. Write that number h			ny entries for pages you have atta	ched	\$855.00

Official Form 106A/B Schedule A/B: Property page 2

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Case number (if known) Document Debtor 1 Samantha E Carrillo Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions.

16.	. Casn Examples: Monev you l	have in your wallet, in your h	nome, in a safe deposit box, an	d on hand when you file your petition	
	■ No	,,	·-····, ··· - ·-··, ···		
17.	Deposits of money Examples: Checking, so	avings, or other financial acc		shares in credit unions, brokerage houses, a each.	nd other similar
	■ No				
	☐ Yes		Institution name:		
18.	Examples: Bond funds,	or publicly traded stocks, investment accounts with br	rokerage firms, money market	accounts	
	■ No □ Yes	Institution or issuer	r name:		
19.	 Non-publicly traded st joint venture 	ock and interests in incorp	oorated and unincorporated	businesses, including an interest in an Ll	LC, partnership, and
	■ No				
	☐ Yes. Give specific inf	formation about them Name of entity:		% of ownership:	
20.	Negotiable instruments	s include personal checks, ca	otiable and non-negotiable in the state of t	tes, and money orders.	
	Yes. Give specific info	armation about them			
	Tes. Give specific file	Issuer name:			
24	Patiroment or nension	a coccumto			
۷١.	 Retirement or pension Examples: Interests in I No 		403(b), thrift savings accounts	, or other pension or profit-sharing plans	
	☐ Yes. List each accour	nt senarately			
	- roo. Elet dadii addaal	Type of account:	Institution name:		
22.		ed deposits you have made s	so that you may continue servion, public utilities (electric, gas, v	ce or use from a company vater), telecommunications companies, or ot	hers
	■ No		lastitution none on in-	B. (al., al.	
	☐ Yes		Institution name or inc	ividuai:	
23.	. Annuities (A contract fo	or a periodic payment of mon	ney to you, either for life or for	a number of years)	
	■ No				
	☐ Yes Is:	suer name and description.			
24.	26 U.S.C. §§ 530(b)(1),	•	qualified ABLE program, or u	under a qualified state tuition program.	
	■ No □ Yes In	stitution name and description	on. Separately file the records	of any interests.11 U.S.C. § 521(c):	
25.	Trusts, equitable or fu	ture interests in property (other than anything listed in	line 1), and rights or powers exercisable	for your benefit

■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... Official Form 106A/B Schedule A/B: Property

		Case 16-19	089	Doc 1	Filed 06/09/16 Document	Entered 06/09/16 16:37:08	Desc Main
Debt	or 1	Samantha E Ca	arrillo		Document	Page 18 of 64 Case number (if known)	
	Exampl No	es, franchises, and les: Building permit Give specific inform	ts, exclu	sive licenses,		n holdings, liquor licenses, professional licens	ses
Mon	ey or p	property owed to y	you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
_	No	unds owed to you		oout them, inc	luding whether you alre	ady filed the returns and the tax years	
	Exampl No	support les: Past due or lur Give specific inform	•	,,,	usal support, child suppo	ort, maintenance, divorce settlement, property	y settlement
	Exampl No	mounts someone les: Unpaid wages, benefits; unpai	, disabili id loans	ty insurance p		efits, sick pay, vacation pay, workers' compe	ensation, Social Security
		ts in insurance po					
	No		e compa		ealth savings account (HSA); credit, homeowner's, or renter's insura Beneficiary:	Surrender or refund
	No		e compa Com	iny of each po	olicy and list its value.		
32. A	Yes. No	Name the insurance	e compa Com Mutu	uny of each popany name: ual of Omal ue you from	olicy and list its value.	Beneficiary: Antonio Miceli	Surrender or refund value:
32. A	Any interference of the component of the	erest in property to the beneficiary one has died. Give specific informagainst third part	Mututhat is donation	ual of Omal ue you from g trust, expec	na someone who has die t proceeds from a life in	Antonio Miceli d surance policy, or are currently entitled to rec	Surrender or refund value:
32. A 1 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	Iny interference of your assomeon No Yes. (Claims Example No Yes. (Cher con No Yes.	erest in property to the the beneficiary of the has died. Give specific informagainst third partiles: Accidents, emponents of the property of	e compa Com Mutt that is d of a living mation ies, who oloymen m	ual of Omal ue you from g trust, expec	someone who has die t proceeds from a life in you have filed a lawsui surance claims, or rights	Antonio Miceli d surance policy, or are currently entitled to rec	Surrender or refund value: \$0.00
32. A 1 5 5 6 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6	Any interference of the control of t	erest in property to the beneficiary one has died. Give specific informagainst third part les: Accidents, employees each claim ontingent and unless and u	Muttatis dof a living mation ies, who bloymen m liquidate m	ual of Omal ue you from g trust, expected disputes, insected claims of	someone who has die t proceeds from a life in you have filed a lawsui surance claims, or rights	Antonio Miceli ed surance policy, or are currently entitled to receive or made a demand for payment to sue	Surrender or refund value: \$0.00
32. A 33. C 34. C 35. A 36.	Any interference of your assomeon of Yes. Other color of Yes. Othe	erest in property to the the beneficiary of the has died. Give specific informagainst third partiles: Accidents, emponents and unline bescribe each claimancial assets you give specific information and the dollar value of the	e compa Comp Mutt that is d of a living mation ies, who oloymen m liquidate m did not mation	ual of Omal ue you from g trust, expectether or not yet disputes, insected claims of	someone who has die t proceeds from a life in you have filed a lawsui surance claims, or rights every nature, including and part 4,	Antonio Miceli ed surance policy, or are currently entitled to receive or made a demand for payment to sue	Surrender or refund value: \$0.00
32. A 33. C 34. C 35. A 36.	Iny interference of your assomeon of Yes. In the control of Yes. In the Yes. In the Control of Yes. In the Control of Yes. In the Control	erest in property to the the beneficiary one has died. Give specific informagainst third particles: Accidents, employees each claimancial assets you. Give specific information and assets you. Give specific information and assets you.	e compa Com Mutt that is d of a living mation ies, who oloymen m liquidate m did not mation all of you	ual of Omal ue you from g trust, expect ether or not y t disputes, insect of the control of the	someone who has die t proceeds from a life in you have filed a lawsui surance claims, or rights every nature, including an om Part 4, including an annual surance and surance claims.	Antonio Miceli Industriance policy, or are currently entitled to receive to read a demand for payment is to sue Industriance policy, or are currently entitled to receive to sue Industriance policy, or are currently entitled to receive to sue Industriance policy, or are currently entitled to receive to sue a demand for payment is to sue	Surrender or refund value: \$0.00 relive property because o set off claims

No. Go to Part 6.

		Case 16-19089	Doc 1	Filed 06/0 Docume		Entered 0 Page 19 of	6/09/16 16:37:08	Desc Main	
Deb	tor 1	Samantha E Carrillo		Docume	1110	rage 19 01	Case number (if known)		
	Yes. G	Go to line 38.							
Part		scribe Any Farm- and Comme ou own or have an interest in fa			You Owi	n or Have an Interes	st In.		
	_ ′	own or have any legal or	equitable in	terest in any fa	rm- or o	commercial fishir	ng-related property?		
	_	Go to Part 7. Go to line 47.							
		••••••							
Part	7:	Describe All Property You	Own or Have a	n Interest in That	You Did	Not List Above			
		have other property of an oles: Season tickets, country			list?				
	L∧a,,,,, I No	oros. Codostr donoto, codina	y olab mombo	nomp					
		Give specific information							
				B 7 Web	- 414				
54.	Add t	he dollar value of all of yo	our entries tro	om Part 7. Writ	e tnat n	umber nere			\$0.00
Part	8:	List the Totals of Each Part of	of this Form						
55.	Part 1	1: Total real estate, line 2							\$0.00
56.	Part 2	2: Total vehicles, line 5				\$14,025.00			
57.	Part 3	3: Total personal and hous	sehold items	, line 15		\$855.00			
58.	Part 4	1: Total financial assets, li	ne 36			\$0.00			
59.	Part 5	5: Total business-related p	property, line	45		\$0.00			
60.	Part 6	6: Total farm- and fishing-	related prope	erty, line 52		\$0.00			
61.	Part 7	7: Total other property not	listed, line 5	54	+	\$0.00			
62.	Total	personal property. Add lin	es 56 through	h 61		\$14,880.00	Copy personal property to	otal\$	14,880.00
63.	Total	of all property on Schedu	ı le A/B . Add li	ine 55 + line 62				\$14.	880.00

Official Form 106A/B Schedule A/B: Property page 5

\$14,880.00

Fill in this info	rmation to identify your	222	111 11111111111111111111111111111111111	,
riii in this infor	mation to identify your	case:		
Debtor 1	Samantha E Carr	illo		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$500.00		\$500.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$75.00		\$75.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$20.00		\$20.00	735 ILCS 5/12-1001(a)
		100% of fair market value, up to any applicable statutory limit	
\$250.00		\$250.00	735 ILCS 5/12-1001(a)
		100% of fair market value, up to any applicable statutory limit	
\$10.00		\$10.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
	\$75.00 \$250.00	\$75.00 \$250.00 \$10.00 \$10.00 \$10.00 \$10.00	\$500.00 \$500.00 \$500.00 \$500.00 \$500.00 \$500.00 \$500.00 \$500.00 \$500.00 \$75.00 \$75.00 \$75.00 \$100% of fair market value, up to any applicable statutory limit \$20.00 \$20.00 \$20.00 \$20.00 \$250.00 \$250.00 \$100% of fair market value, up to any applicable statutory limit

Filed 06/09/16 Entered 06/09/16 16:37:08 Document Page 21 of 64 Debtor 1 Samantha E Carrillo Case number (if known) 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Case 16-19089

Yes

Doc 1

Desc Main

Fill in this information		Document		() h/		
	າ to identify yoເ		Page 22	() ()4		
Debtor 1 Sa	amantha E Ca	rrillo				
	st Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing) Firs	st Name	Middle Name	Last Name			
United States Bankrup	tcy Court for the	NORTHERN DISTRICT OF II	LLINOIS			
Case number						
(if known)					☐ Check	if this is an
					amen	ded filing
Official Form 10	6D					
		Who Have Claims	Secured	l by Propert	v	12/15
				<u> </u>		
		If two married people are filing toge out, number the entries, and attach				
. Do any creditors have	claims secured by	y your property?				
□ No. Check this b	oox and submit t	his form to the court with your other	er schedules. Yo	ou have nothing else t	o report on this form.	
Yes. Fill in all of	the information	below.				
Part 1: List All Sec	ured Claims					
2. List all secured claims	s. If a creditor has	more than one secured claim, list the c	reditor separately	Column A	Column B	Column C
		a particular claim, list the other creditor cal order according to the creditor's na		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Hyundai Capit	al Americ	Describe the property that secure	s the claim:	\$18,133.00	\$14,025.00	\$4,108.00
Creditor's Name		2012 Hyundai Tucson 50,0 Value based on NADA clea				
4000 Macarthu		As of the date you file, the claim is	S: Check all that			
Newport Beach 92660	II, CA	apply. Contingent				
Number, Street, City, S	tate & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt? C	heck one.	Nature of lien. Check all that apply	<i>'</i> .			
Debtor 1 only		An agreement you made (such a	s mortgage or sec	ured		
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2	-	☐ Statutory lien (such as tax lien, m	nechanic's lien)			
At least one of the deb		☐ Judgment lien from a lawsuit		.!		
☐ Check if this claim re community debt	lates to a	Other (including a right to offset)	Lien on veh	nicie		
	Opened					
	3/01/14					
	Last Active 3/05/16	Last 4 digits of account nu	mber 5341			
Date debt was incurred	3/03/10	_	-			

Add the dollar value of your entries in Column A on this page. Write that number here: \$18,133.00 If this is the last page of your form, add the dollar value totals from all pages. \$18,133.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

			Docum	ent Page 2	3 of 64	
Fill	in this inforn	nation to identify your	case:			
Del	otor 1	Samantha E Carr	illo			
D 0 k	7.01	First Name	Middle Name	Last Name		
Deb	otor 2					
(Spo	use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ba	nkruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
		., .,				
	se number _				_	
(IT KN	own)					Check if this is an
						amended filing
)ff	icial Forn	n 106F/F				
			ho Have Unsec	ured Claims		12/15
					Part 2 for creditors with NONPRIORITY	
					contracts on Schedule A/B: Property (O	
					any creditors with partially secured cla	
					the Part you need, fill it out, number the	
		ıtinuation Page to this pag nber (if known).	je. If you have no informat	on to report in a Part,	do not file that Part. On the top of any a	idditional pages, write your
		II of Your PRIORITY Ur	secured Claims			
		ors have priority unsecure				
	No. Go to P	Part 2	,			
	Yes.	uit 2.				
Dar		II of Your NONPRIORIT	V Uneccured Claims			
			cured claims against you?			
	☐ No. You hav	ve nothing to report in this p	art. Submit this form to the o	ourt with your other sche	edules.	
	Yes.					
4	List all of your	r nonnriority unsecured cl	aims in the alphahetical or	der of the creditor who	holds each claim. If a creditor has more	than one nonnriority
	unsecured clair	m, list the creditor separatel	y for each claim. For each cl	aim listed, identify what t	type of claim it is. Do not list claims alread	y included in Part 1. If more
	than one credit Part 2.	or holds a particular claim, I	ist the other creditors in Part	3.If you have more than	three nonpriority unsecured claims fill out	t the Continuation Page of
						Total claim
4.1	Alliance	- One	Last 4 digi	ts of account number	9138	\$0.00
		y Creditor's Name			<u> </u>	Ψ0.00
	4850 St	reet rd	When was	the debt incurred?	15	
	Ste 300					
		ville Trevose, PA 19 treet City State Zlp Code		late you file, the claim	ie: Chock all that apply	
		rred the debt? Check one.	A3 of the C	late you me, the claim	s. Oneck all that apply	
	■ Debtor		☐ Conting	ant		
			=			
	☐ Debtor	· · · · ·	☐ Unliquid			
		1 and Debtor 2 only	☐ Dispute	a ONPRIORITY unsecure	d alaim.	
		t one of the debtors and an			, ciaiii.	
	∐ Check debt	if this claim is for a com	nunity — 5 to 5 to 5			
		m subject to offset?		ons arising out of a sepa iority claims	aration agreement or divorce that you did r	IUI
	■ No	-		•	ng plans, and other similar debts	
	□ Yes			Specify Notice Only		
	□ res		Other. S	specify 140tice Offi	<u>'</u>	

Case 16-19089 Doc 1 Filed 06/09/16 Entered 06/09/16 16:37:08 Desc Main Document Page 24 of 64

Debtor 1 Samantha E Carrillo Case number (if know) 4.2 \$3,498.00 Amex Last 4 digits of account number 2853 Nonpriority Creditor's Name Opened 12/01/11 Last Active P.o. Box 981537 When was the debt incurred? 6/03/15 El Paso, TX 79998 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.3 **Bk Of Amer** 6189 Last 4 digits of account number \$4,750.00 Nonpriority Creditor's Name Opened 5/01/13 Last Active 4161 Piedmont Pkwy When was the debt incurred? 6/24/15 Greensboro, NC 27410 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Automobile ☐ Yes 4.4 **Blitt & Gaines** Last 4 digits of account number 7126 \$0.00 Nonpriority Creditor's Name 661 Glenn Ave 15 When was the debt incurred? Wheeling, IL 60090 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Notice Only

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Desc Main Document Page 25 of 64 Debtor 1 Samantha E Carrillo Case number (if know) 4.5 \$2,484.00 Cach Llc Last 4 digits of account number 2906 Nonpriority Creditor's Name 4340 S Monaco, Second Floor When was the debt incurred? Denver, CO 80237 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Sallie Mae Bank ☐ Yes Center of Brain and Spine Surgery 4.6 \$488.00 Last 4 digits of account number 1076 Nonpriority Creditor's Name 1875 W Dempster When was the debt incurred? 16 Suite 410 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify 4.7 **Central Credit Services** \$0.00 2869 Last 4 digits of account number Nonpriority Creditor's Name PO Box 15118 When was the debt incurred? 2015 Jacksonville, FL 32239 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated

Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Account for American Express. Other. Specify Notice only. ☐ Yes

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Debtor 1 Samantha E Carrillo Case number (if know) 4.8 \$2,605.00 **Chase Card** Last 4 digits of account number 9367 Nonpriority Creditor's Name Opened 3/01/15 Last Active Po Box 15298 When was the debt incurred? 4/10/16 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.9 Comenity 4059 Last 4 digits of account number \$817.00 Nonpriority Creditor's Name PO Box 182273 When was the debt incurred? 15 Columbus, OH 43218-2273 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other, Specify 4.1 Dept Of Ed/navient \$9,109.00 1107 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 11/01/08 Last Active Po Box 9635 When was the debt incurred? 2/09/15 Wilkes Barre, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Educational

Other. Specify

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Case number (if know)

Debtor 1 Samantha E Carrillo 4.1 \$8,740.00 Dept Of Ed/navient 0911 Last 4 digits of account number Nonpriority Creditor's Name Opened 9/01/09 Last Active Po Box 9635 When was the debt incurred? 2/09/15 Wilkes Barre, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.1 Dept Of Ed/navient 0111 \$5,896.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 1/01/11 Last Active Po Box 9635 When was the debt incurred? 2/09/15 Wilkes Barre, PA 18773 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational 4.1 Dept Of Ed/navient 0224 \$5,593.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Opened 2/01/10 Last Active Po Box 9635 When was the debt incurred? 2/09/15 Wilkes Barre, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify

Official Form 106 E/F

Educational

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Case number (if know) Debtor 1 Samantha E Carrillo 4.1 Dept Of Ed/navient 0224 \$4,984.00 Last 4 digits of account number 4 Nonpriority Creditor's Name Opened 2/01/10 Last Active Po Box 9635 When was the debt incurred? 2/09/15 Wilkes Barre, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.1 Dept Of Ed/navient 0911 \$4,984.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Opened 9/01/09 Last Active Po Box 9635 When was the debt incurred? 2/09/15 Wilkes Barre, PA 18773 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational 4.1 Dept Of Ed/navient 1107 \$3,905.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Opened 11/01/08 Last Active Po Box 9635 When was the debt incurred? 2/09/15 Wilkes Barre, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify

Official Form 106 E/F

Educational

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Case number (if know) Debtor 1 Samantha E Carrillo 4.1 Dept Of Ed/navient 0224 \$2,796.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 2/01/10 Last Active Po Box 9635 When was the debt incurred? 2/09/15 Wilkes Barre, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.1 Dept Of Ed/navient 0111 \$2,637.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 1/01/11 Last Active Po Box 9635 When was the debt incurred? 2/09/15 Wilkes Barre, PA 18773 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational 4.1 \$2,474.00 Dept Of Ed/navient 0220 Last 4 digits of account number 9 Nonpriority Creditor's Name Opened 2/01/12 Last Active Po Box 9635 When was the debt incurred? 2/09/15 Wilkes Barre, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify

Official Form 106 E/F

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Case number (if know) Debtor 1 Samantha E Carrillo 4.2 Dept Of Ed/navient 0220 \$1,566.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 2/01/12 Last Active Po Box 9635 When was the debt incurred? 2/09/15 Wilkes Barre, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.2 **Discover Fin Sycs Llc** 8745 \$3,384.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 10/01/11 Last Active Po Box 15316 When was the debt incurred? 2/06/15 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.2 **Elmhurst Memorial Healthcare** 2869 \$450.00 Last 4 digits of account number Nonpriority Creditor's Name 27535 Network Place When was the debt incurred? 2014 Chicago, IL 60673 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes

Document Page 31 of 64 Case number (if know) Debtor 1 Samantha E Carrillo 4.2 Joseph Mann & Creed 1160 \$0.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 8948 Canyon Falls Blvd When was the debt incurred? 16 Suite 200 Twinsburg, OH 44087 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Notice Only 4.2 Mandarich Law Group LLP 2129 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 1 N Dearborn 2016 When was the debt incurred? Suite 650 Chicago, IL 60602 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Account for Cach, LLC. Notice ☐ Yes Other. Specify 4.2 Med Busi Bur 5852 \$140.00 Last 4 digits of account number Nonpriority Creditor's Name 1460 Renaissance Dr Opened 6/01/15 When was the debt incurred? Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

☐ Yes

debt

■ No

■ Other. Specify Emerg Med Servs

report as priority claims

☐ Obligations arising out of a separation agreement or divorce that you did not

Collection Attorney Med1 02 Elmhurst

☐ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Page 32 of 64 Case number (if know) Document Debtor 1 Samantha E Carrillo 4.2 **Merchants Credit Guide** 0002 \$3,200.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 223 W Jackson Blvd Ste 4 When was the debt incurred? Opened 5/01/15 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Elmhurst Memorial** ☐ Yes Other. Specify Healthcare 4.2 \$118.00 **Merchants Credit Guide** 4322 Last 4 digits of account number Nonpriority Creditor's Name 223 W Jackson Blvd Ste 4 When was the debt incurred? Opened 5/01/15 Chicago, IL 60606 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Elmhurst Memorial** ☐ Yes Other. Specify Healthcare 4.2 **Merchants Credit Guide** 4303 \$95.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 223 W Jackson Blvd Ste 4 When was the debt incurred? Opened 3/01/15 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another

☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Attorney Elmhurst Memorial** ☐ Yes Other. Specify Healthcare

Document Page 33 of 64 Debtor 1 Samantha E Carrillo Case number (if know) 4.2 **Merchants Credit Guide** 4323 \$77.00 Last 4 digits of account number 9 Nonpriority Creditor's Name 223 W Jackson Blvd Ste 4 When was the debt incurred? Opened 5/01/15 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Elmhurst Memorial** ☐ Yes Other. Specify Healthcare 4.3 Midland Funding \$1,421.00 1244 Last 4 digits of account number 0 Nonpriority Creditor's Name 2365 Northside Dr Ste 30 Opened 10/01/15 When was the debt incurred? San Diego, CA 92108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts **Factoring Company Account Synchrony** ☐ Yes Other. Specify Bank 4.3 **Portfolio Recovery Ass** 7110 \$1,182.00 Last 4 digits of account number Nonpriority Creditor's Name 120 Corporate Blvd Ste 1 When was the debt incurred? Opened 12/01/15 Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Other Specify Financial Network Bank

Factoring Company Account World

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Last 4 digits of account number	4059	.	
	7000	\$942.	
When was the debt incurred?	Opened 11/01/15		
As of the date you file, the claim	is: Check all that apply		
Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.			
☐ Contingent			
☐ Unliquidated			
☐ Disputed			
Type of NONPRIORITY unsecured claim:			
☐ Student loans			
Check if this claim is for a community bbt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
Debts to pension or profit-sharing	g plans, and other similar debts		
■ Other. Specify Factoring Company Account World Financial Network Bank			
Last 4 digits of account number	2869	\$0	
When wee the debt incomed?	2010		
when was the debt incurred?	2010		
As of the date you file, the claim i	is: Check all that apply		
☐ Contingent			
☐ Unliquidated			
☐ Disputed			
Type of NONPRIORITY unsecured	d claim:		
☐ Student loans			
	aration agreement or divorce that you did not		
Other. Specify Credit Card	<u> </u>		
Last 4 digits of account number	0345	\$565	
When was the debt incurred?	13		
As of the date you file, the claim	is: Check all that apply		
,			
☐ Contingent			
`			
Type of NONPRIORITY unsecured claim:			
☐ Student loans			
Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
☐ Debts to pension or profit-sharin	ng plans, and other similar debts		
	As of the date you file, the claim Contingent Unliquidated Disputed Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharing Cother. Specify Factoring (Financial Notes) Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Other. Specify Credit Carco Last 4 digits of account number When was the debt incurred? Student loans Other. Specify Credit Carco Contingent Unliquidated Disputed Other. Specify Credit Carco Student loans Other Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Obligations arising out of a separeport as priority claims	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Pactoring Company Account World Financial Network Bank Last 4 digits of account number When was the debt incurred? 2010 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify Credit Card Last 4 digits of account number 13 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Other. Specify Credit Card Last 4 digits of account number Other. Specify Credit Card Loast 4 digits of account number Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims or the claim is: Check all that apply	

☐ Yes

■ Other. Specify Cell

Debt	Case 16-19089 Doc 1 or 1 Samantha E Carrillo		ed 06/09/16 16:37:08 Desc M 5 of 64 Case number (if know)	lain		
4.3 5	Td Bank Usa/targetcred	Last 4 digits of account number	5691	\$528.00		
	Nonpriority Creditor's Name Po Box 673 Minneapolis, MN 55440	When was the debt incurred?	Opened 11/01/14 Last Active 3/02/15			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans	<u> </u>			
	debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims Step Community Comm					
	■ No	☐ Debts to pension or profit-sharir	Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	Other. Specify Credit Card	<u> </u>			
4.3	Victoria's Secret	Last 4 digits of account number	2869	\$0.00		
	Nonpriority Creditor's Name Bankruptcy Department PO Box 182125 Columbus, OH 43218 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim	2012			
	Who incurred the debt? Check one.	oneck all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharir				
	Yes	■ Other. Specify Credit Card	<u>d</u>			
4.3	Weltman, Weinberg & Reis Co	Look & dimits of account number	1102	\$0.00		
7	Nonpriority Creditor's Name	Last 4 digits of account number		φυ.υι		
	180 N LaSalle St, Suite 240 Chicago, IL 60601	When was the debt incurred?	16			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed				
	→ Deptor 1 and Deptor 2 only	■ Disputed				

Part 3: List Others to Be Notified About a Debt That You Already Listed

■ Other. Specify Notice Only

Type of NONPRIORITY unsecured claim:

 \square Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

debt

■ No

☐ Yes

lacksquare At least one of the debtors and another

Is the claim subject to offset?

 $\hfill\square$ Check if this claim is for a community

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Samantha E Carrillo

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total				-	
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.	\$	Total Claim 52,684.00
Total	01.	Stadon Sant	01.	Ψ	32,004.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	26,744.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	79,428.00

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Fill in this infor	Il in this information to identify your case:							
Debtor 1	Samantha E Carr	illo						
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS					
Case number								
()								

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	whom you have the r, Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	City		State	Zii Code	
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
					·

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		Documei	nt Page 38 of	64	
Fill in this in	nformation to identify your	case:			
Debtor 1	Samantha E Carr	illo			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	s Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numbe (if known)	ur				☐ Check if this is an
					amended filing
Official	Form 106H				
	ile H: Your Cod	obtors			40/45
Scriedo	ile n. Tour Cou	enroi 2			12/15
people are fil ill it out, and our name a	re people or entities who a ling together, both are equ I number the entries in the nd case number (if known) ou have any codebtors? (If	ally responsible for suppl boxes on the left. Attach . Answer every question.	lying correct informatio the Additional Page to	on. If more space is needed this page. On the top of a	possible. If two married d, copy the Additional Page, ny Additional Pages, write
□ No					
■ Yes					
– 165					
	n the last 8 years, have you California, Idaho, Louisiana				es and territories include
■ No. G	io to line 3.				
☐ Yes. [Did your spouse, former spo	use, or legal equivalent live	with you at the time?		
in line 2	again as a codebtor only i 06D), Schedule E/F (Officia	f that person is a guarant	or or cosigner. Make su	ure you have listed the cre	n you. List the person shown ditor on Schedule D (Official dule E/F, or Schedule G to fill
	olumn 1: Your codebtor me, Number, Street, City, State and Z	P Code		Column 2: The creditor Check all schedules that	to whom you owe the debt apply:
93	ora Pacian 807 Irving Park Rd Chiller Park, IL 60176			■ Schedule D, line □ Schedule E/F, line _ □ Schedule G Hyundai Capital Ame	

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- :11	in this information to identify					1			
	in this information to identify your otor 1 Samantha								
	otor 2	<u>L Carrino</u>							
_	buse, if filing)				_				
Uni	ted States Bankruptcy Court for th	e: NORTHERN DISTRIC	CT OF ILLINOIS		_				
	se number		-			Check if t			
(II KI	iown)						mended filing	•	
_								wing postpetition ne following date:	
<u>O</u>	fficial Form 106I					MM /	DD/ YYYY		
S	chedule I: Your Inc	come							12/1
	t 1: Describe Employmen Fill in your employment information.		Debtor 1	our name	e and		·	n). Answer every	question
	If you have more than one job,		Employment status Employed Not employed				Employed		
	attach a separate page with information about additional	Employment status					Not employe	ed	
	employers.	Occupation	Unemployed						
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Par	t 2: Give Details About Mo	onthly Income							
spoo If yo	mate monthly income as of the use unless you are separated. ou or your non-filing spouse have not space, attach a separate sheet to	nore than one employer, co		·	•			•	
						For Debtor		Debtor 2 or a-filing spouse	
2.	List monthly gross wages, sal deductions). If not paid monthly			2.	\$		0.00 \$_	N/A	
3.	Estimate and list monthly ove	rtime pay.		3.	+\$		0.00 +\$	N/A	
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$	0.0	00 \$	N/A	

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Deb	tor 1	Samantha E Carrillo	-	Case	number (if kr	nown)				
					Debtor 1		non	Debtor n-filing s	spouse	
	Cop	by line 4 here	4.	\$_	(0.00	_		N/A	
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	. \$	(0.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.	. \$	(0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c.	. \$_	(00.0	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d.	. \$	(00.0	\$		N/A	
	5e.	Insurance	5e.	· · —		0.00	- : —		N/A	
	5f.	Domestic support obligations	5f.			0.00			N/A	
	5g.	Union dues	5g.			0.00			N/A	
	5h.	Other deductions. Specify:	_ 5h	.+ \$_			_ + \$		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	(0.00	_ \$_		N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	(0.00	_ \$		N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	. \$,		\$		NI/A	
	8b.	Interest and dividends	8b.			0.00 0.00			N/A N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	· —).00).00	- · <u>-</u>		N/A	
	8d.	Unemployment compensation	8d.			0.00	- ' —		N/A	
	8e.	Social Security	8e.	. \$		0.00			N/A	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g.			0.00			N/A N/A	
	8h.	Other monthly income. Specify:	8h	_			+ \$		N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	(0.00	\$_		N/A	
10	Cal	aulata manthly income. Add line 7 y line 0	40	<u>.</u>	0.00	+ \$			= \$	0.00
10.		culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	0.00	+ \$		N/A	= \$	0.00
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depe		. •				e J. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certainlies						12.	\$	0.00
13.	Do	you expect an increase or decrease within the year after you file this form	?						Combined monthly is	
		No.								

Official Form 106I Schedule I: Your Income page 2

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Debtor 2 (Spouse, if filing)	13 expenses as of MM / DD / YYYY ally responsible for onal pages, write y	12/1 or supplying correct
Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (If known) Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equal information. If more space is needed, attach another sheet to this form. On the top of any addition number (if known). Answer every question. Part 1: Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Ob ont list Debtor 1 and Debtor 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Dependent's relationship to Debtor 1 or Debtor 2. Dependent No Dependent No Dependent No Dependent No Yes. No Yes.	A supplement show 13 expenses as of MM / DD / YYYYY ally responsible for onal pages, write y tor 2. Dependent's	the following date: 12/1 or supplying correct your name and case
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number ((If known) Case number	ally responsible for onal pages, write y	12/1 or supplying correct your name and case
Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equal information. If more space is needed, attach another sheet to this form. On the top of any addition number (if known). Answer every question. Part 1: Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debt 2. Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Dependent's relationship to Debtor 1 or Debtor 2 Dependent's relationship to Debtor 1 or Debtor 2 Dependent No Yes. Pill out this information for each dependent	ally responsible foonal pages, write y	or supplying correct your name and case
Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equal information. If more space is needed, attach another sheet to this form. On the top of any additionumber (if known). Answer every question. Part 1: Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Fill out this information for each dependent Dependent's relationship to Debtor 1 or Debtor 2 Dependent Dependent No Dependent	onal pages, write y tor 2. Dependent's	or supplying correct your name and case
Be as complete and accurate as possible. If two married people are filing together, both are equal information. If more space is needed, attach another sheet to this form. On the top of any addition number (if known). Answer every question. Part 1: Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents? No. Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Fill out this information for each dependent	onal pages, write y tor 2. Dependent's	or supplying correct your name and case
Be as complete and accurate as possible. If two married people are filling together, both are equalinformation. If more space is needed, attach another sheet to this form. On the top of any addition number (if known). Answer every question. Part 1: Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Po not list Debtor 1 and Debtor 2. Do not state the dependents names. Dependent's relationship to Debtor 1 or Debtor 2 Dependent	onal pages, write y tor 2. Dependent's	or supplying correct your name and case
information. If more space is needed, attach another sheet to this form. On the top of any addition number (if known). Answer every question. Part 1: Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Fill out this information for each dependent Dependent's relationship to Debtor 1 or Debtor 2 Dependent Dependent No Dependent Perendent	onal pages, write y tor 2. Dependent's	our name and case
1. Is this a joint case? ■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household? □ No □ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debt 2. Do you have dependents? □ No □ Do not list Debtor 1 and □ Yes. Fill out this information for each dependent Dependent's relationship to Debtor 2. □ Do not state the dependents names. □ Dependent □ Dependent □ Dependent □ Dependent □ No □ Yes □ No □ Yes	Dependent's	Does dependent
No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Fill out this information for each dependent	Dependent's	Does dependent
 Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents?	Dependent's	Does dependent
□ No □ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debt 2. Do you have dependents? □ No □ Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's	Does dependent
2. Do you have dependents?	Dependent's	Does dependent
Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Fill out this information for each dependent	•	Does dependent
Debtor 2. Do not state the dependents names. Dependent Dependent Dependent Dependent No expenses of people other than yourself and your dependents?	•	Does dependent
3. Do your expenses include expenses of people other than yourself and your dependents?	age	live with you?
3. Do your expenses include expenses of people other than yourself and your dependents? ■ No □ Yes		□ No
expenses of people other than yourself and your dependents?	_ 1	Yes
expenses of people other than yourself and your dependents?		□ No □ Yes
expenses of people other than yourself and your dependents?		□ No
expenses of people other than yourself and your dependents?		☐ Yes
expenses of people other than yourself and your dependents?		□ No
expenses of people other than yourself and your dependents?		☐ Yes
yourself and your dependents?		
Part 2: Estimate Your Ongoing Monthly Expenses		
Part 2: Estimate Your Ongoing Monthly Expenses		
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a su expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check thapplicable date.		
Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)	Your expe	enses
 The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. \$ 	S	400.00
If not included in line 4:		
4a. Real estate taxes 4a. \$	S	0.00
4b. Property, homeowner's, or renter's insurance 4b. \$		0.00
4c. Home maintenance, repair, and upkeep expenses 4c. \$		0.00
 4d. Homeowner's association or condominium dues 5. Additional mortgage payments for your residence, such as home equity loans 5. \$ 	b	0.00

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Depto	Samanti	ha E Carrillo	Case num	ber (if known)	
6. L	Jtilities:				
-		, heat, natural gas	6a.	\$	0.00
		wer, garbage collection	6b.	·	0.00
	-	e, cell phone, Internet, satellite, and cable services	6c.		0.00
	id. Other. Sp		6d.		0.00
		sekeeping supplies	7.	\$	0.00
		children's education costs	8.	\$	0.00
		ry, and dry cleaning	9.	·	0.00
		products and services	10.		
					0.00
		ental expenses	11.	Ф	0.00
	ransportation To not include o	Include gas, maintenance, bus or train fare.	12.	\$	0.00
		clubs, recreation, newspapers, magazines, and books	13.	·	0.00
		tributions and religious donations	14.	·	0.00
	nsurance.	unbutions and religious domations	14.	Φ	0.00
		nsurance deducted from your pay or included in lines 4 or 20.			
	5a. Life insura		15a.	\$	0.00
	5b. Health ins		15b.		0.00
	5c. Vehicle in		15c.		0.00
	5d. Other insu		15d.	·	0.00
		nclude taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
	Specify:	icidde taxes deducted from your pay of included in lines 4 of 20.	16.	\$	0.00
		ease payments:		·	0.00
		ents for Vehicle 1	17a.	\$	0.00
		ents for Vehicle 2	17b.	·	0.00
	7c. Other. Sp		17c.	•	0.00
	7d. Other. Sp		17d.	·	
	•	•		Φ	0.00
		of alimony, maintenance, and support that you did not report as your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
		s you make to support others who do not live with you.	_	\$	0.00
	Specify:	o you make to cappe to an income and income make you.	19.		0.00
		erty expenses not included in lines 4 or 5 of this form or on Sch	-	our Income	
		s on other property	20a.		0.00
	:0b. Real esta		20b.		0.00
		homeowner's, or renter's insurance	20c.		0.00
		nce, repair, and upkeep expenses	20d.	· <u> </u>	0.00
		ner's association or condominium dues	20d. 20e.	•	
		ier's association of condominium dues		·	0.00
ı. C	Other: Specify:		21.	+\$	0.00
2. C	alculate vour	monthly expenses			
	22a. Add lines 4	• •		\$	400.00
		22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
		a and 22b. The result is your monthly expenses.		\$	400.00
	20. Aud III le 22	a and 220. The result is your monthly expenses.		Ψ	400.00
3. C	alculate your	monthly net income.			
2	3a. Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	0.00
		r monthly expenses from line 22c above.	23b.	-\$	400.00
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	- '			
2	3c. Subtract	your monthly expenses from your monthly income.			
_		t is your monthly net income.	23c.	\$	-400.00
		•			·
		an increase or decrease in your expenses within the year after y			
		ou expect to finish paying for your car loan within the year or do you expect you	ır mortgage ı	payment to increase	e or decrease because o
	_	terms of your mortgage?			
	No.				
Г	Yes	Explain here:			

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Fill in this infor	mation to identify your	casa:			
Debtor 1	Samantha E Carr	Middle Name	Last Name		
Debtor 2	. not reamo	madic Hame	Zaot Hamo		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
Official For					
Declarat	tion About a	an Individual	Debtor's Sc	hedules	12/15
	8 U.S.C. §§ 152, 1341, 1 in Below				
Did you pa	ay or agree to pay some	eone who is NOT an attorn	ney to help you fill out b	pankruptcy forms?	
■ No					
☐ Yes.	Name of person				tcy Petition Preparer's Notice, d Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sumn	nary and schedules file	d with this declaration a	nd
X /s/ Sar	mantha E Carrillo		X		
Samai	ntha E Carrillo ure of Debtor 1		Signature of	Debtor 2	
Date	June 9, 2016		Date		

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Debtor 1 Samantha E Carrillo Pre: None Debtor 2 Service		41					
Debtor 2 Government First Name							
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (** townwo**) Check if this is an amended filling Official Form 107 Statement of Financial Affairs for Individuals Filling for Bankruptcy 4/16 Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needled, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. What is your current married status?	Debt	or 1			Last Name		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number							
Case number Check if this is an amended filing Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 4/16 Bo as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married	(Spous	se if, filing)	First Name	Middle Name	Last Name		
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy ###################################	Unite	d States Bar	nkruptcy Court for the:	NORTHERN DISTRICT O	OF ILLINOIS		
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Fant 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married No Tyes. List all of the places you lived anywhere other than where you live now? Debtor 1 Prior Address: Debtor 2 Prior Address: Debtor 1 Prior Address: Debtor 2 Prior Address: Debtor 2 Prior Address: Debtor 2 Prior Address: Destail Bebtor 1 Debtor 2 Prior Address: Destail Form 108 Same as Debtor 1 Pront 108 Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Toxas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. Debtor 1 Sources of income Check all that apply. Celefore deductions and Check all that apply. Debtor 2 Sources of income (Check all that apply). Debtor 4 Sources of income (Check all that apply). Efform January 1 of current year until the date you filed for bankruptcy: Debtor 1 Survey of Park and Check all that apply. Debtor 2 Sources of income (Check all that apply). Debtor 3 Sources of income (Check all that apply). Debtor 4 Sources of income (Check all that apply). Debtor 5 Sources o	Case	number					
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question. Fart 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married 2. During the last 3 years, have you lived anywhere other than where you live now? Pest. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Inved there 2011 72nd Ct Elmwood Park, IL 60707 2014-2015 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Artzona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. Sources of income Check all that apply. Check all that apply. Check all that apply. (before deductions and exclusions) bouses, tips Debtor 1 Wages, commissions, bonuses, tips	(if know	wn)				_	
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 15							amended filing
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 15	O((407				
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2. During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address:	[☐ Married					
□ No □ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: □ Dates Debtor 1 □ Ived there □ 2011 72nd Ct □ Elmwood Park, IL 60707 □ College of Prior Prior Address: □ Same as Debtor 1 □ No □ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a businesses, including part-time activities. □ No □ Yes. Fill in the details. □ No □ Yes. Fill in the details. □ No □ Yes. Fill in the details. □ Debtor 1 □ Sources of income Check all that apply. □ Debtor 2 □ Sources of income Check all that apply. □ Debtor 2 □ Sources of income Check all that apply. □ Wages, commissions, bonuses, tips □ Wages, commissions, bonuses, tips □ Wages, commissions, bonuses, tips		Not mar	ried				
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lived there 2011 72nd Ct From-To:		Debtor 1 Pri	ior Address	Dates Debtor 1	Debtor 2 Prior Ac	Idraee:	Dates Debtor 2
Sources of income that you receive together, list it only once under Debtor 1.		Debtor 1111	ioi Addiess.		Debtor 21 Hor Ac	idi 633.	
3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Pes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips		-			☐ Same as Debtor	1	
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4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Debtor 2 Sources of income Check all that apply. Gross income (before deductions and exclusions) \$0.00 Wages, commissions, bonuses, tips		→ Yes. Ma	ike sure you fill out Sci	nedule H: Your Codebtors (O	TICIAI FORM 106H).		
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No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$0.00	F	fill in the tota	I amount of income yo	ou received from all jobs and a	all businesses, including part	-time activities.	ildai years:
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Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$0.00 Umages, commissions, bonuses, tips				Debtor 1		Debtor 2	
exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Wages, commissions, which was the wages Wages, which was the wages Wages, which was the wages Wages, which was the wages Wages					Gross income		Gross income
the date you filed for bankruptcy: bonuses, tips bonuses, tips				Check all that apply.	•	Check all that apply.	
the date you filed for bankruptcy: bonuses, tips bonuses, tips	Fron	January 1	of current year until	☐ Wages, commissions	\$0.00	☐ Wages, commissions	
☐ Operating a business ☐ Operating a business					* - 12 -	=	
				☐ Operating a business		☐ Operating a business	

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Debtor 1 Samantha E Carrillo

				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	(bef	ss income ore deductions and usions)	Sources of Check all tha		Gross income (before deductions and exclusions)
	For last calendar year: (January 1 to December 31, 2015)		31, 2015)	■ Wages, commissions, \$2,682.00 bonuses, tips		☐ Wages, of bonuses, tip	commissions, s		
				☐ Operating a business			☐ Operating	g a business	
For (Ja	the calen	dar year bef December 3	ore that: 31, 2014)	■ Wages, commissions, bonuses, tips		\$24,192.00	☐ Wages, of bonuses, tip	ommissions, s	
				☐ Operating a business			☐ Operating	g a business	
5.	Include include and other winnings. List each s	come regard public benefi If you are fili	ess of wheth t payments; p ng a joint cas ne gross inco	e during this year or the two er that income is taxable. Ex- pensions; rental income; inte e and you have income that me from each source separa	amples rest; div you rec	of other income are a idends; money collectived together, list it	alimony; child so cted from lawsu only once unde	its; royalties; ar Debtor 1.	Security, unemployment, and gambling and lottery
				Debtor 1			Debtor 2		
				Sources of income Describe below.	eacl (bef	ss income from h source ore deductions and usions)	Sources of Describe be		Gross income (before deductions and exclusions)
Par	rt 3: List	Certain Pay	ments You	Made Before You Filed for	Bankru	ıptcy			
6.	□ No.	Neither De individual puring the No. Yes	btor 1 nor D rimarily for a 90 days befo Go to line 7. List below e paid that cre not include o adjustment r Debtor 2 o 90 days befo Go to line 7. List below e include pay	ach creditor to whom you pa editor. Do not include paymen payments to an attorney for t on 4/01/19 and every 3 year r both have primarily const re you filed for bankruptcy, d	umer de la purpo de la purpo de la tota nts for ce this banders after the la purpo de la purpo della purpo de la purpo della p	ebts. Consumer debose." ay any creditor a total of \$6,425* or more lomestic support oblication cases filed or ebts. ay any creditor a total of \$600 or more and of \$600 or more and ose.	al of \$6,425* or in one or more gations, such as or after the data of \$600 or model of the total amounts.	more? payments and to schild support and adjustmenter?	the total amount you and alimony. Also, do t.
			•	uno parintupidy dase.					
	Creditor'	s Name and	Address	Dates of payme	ent	Total amount paid	Amount you still ow		payment for

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Debtor 1	Samantha E Carrillo		Cas	e number (if known)					
<i>Insid</i> of wh	in 1 year before you filed for bankrupt ders include your relatives; any general pa nich you are an officer, director, person in siness you operate as a sole proprietor. 1 ony.	artners; relatives of any gene control, or owner of 20% or	eral partners; partners of their voting	erships of which yo g securities; and a	ou are a general pa ny managing agent	, including one for			
	No Voc List all normants to an incider								
	Yes. List all payments to an insider. der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this	payment			
insid	Vithin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an asider? Include payments on debts guaranteed or cosigned by an insider.								
	No Yes. List all payments to an insider	Dates of naviment	Total amount	A manuat van	Deggen for this				
insi	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this Include creditor's				
Part 4:	Identify Legal Actions, Repossession	ns, and Foreclosures							
List a	in 1 year before you filed for bankrupt all such matters, including personal injury ifications, and contract disputes.								
	No Yea Fill in the details								
	Yes. Fill in the details. se title	Nature of the case	Court or agency		Status of the ca	ıse			
Cas Dis vs Sar	nantha E Carrilo M4001102	Collection	on Circuit Court of Cook County 50 W Washington St Chicago, IL 60602		■ Pending □ On appeal □ Concluded				
	ch Llc v. Samantha E Carrillo M4 002129	Breach of Contract	Cook County 50 W Washingt Chicago, IL 606		Pending On appeal Concluded				
Cai	lland Funding v. Samantha E rillo M4 001596	Breach of Contract	Cook County 50 W Washingt Chicago, IL 600		■ Pending □ On appeal □ Concluded				
	in 1 year before you filed for bankrupt ck all that apply and fill in the details below No. Go to line 11.		rty repossessed, f	oreclosed, garnis	shed, attached, se	ized, or levied?			
	Yes. Fill in the information below.								
Cre	ditor Name and Address	Describe the Property		Date		Value of the property			
	in 90 days before you filed for bankrup ounts or refuse to make a payment bec			nancial institution	n, set off any amou	unts from your			

Describe the action the creditor took

Amount

☐ Yes. Fill in the details.Creditor Name and Address

Date action was

taken

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Bizar & Doyle, LLC

Chicago, IL 60602 joe@bizardoylelaw.com

Suite 205

123 West Madison Street

Attorney Fees

\$850.00

2016

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Debtor 1 Samantha E Carrillo

17.	 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. 									
	Person Who Was Paid Address	Description and variansferred	alue of any propert	Date payment or transfer was made	Amount of payment					
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your burneline both outright transfers and transfers minclude gifts and transfers that you have alread No Yes. Fill in the details.	ousiness or financial affa ade as security (such as	airs? the granting of a sec							
	Person Who Received Transfer Address	Description and v		Describe any property or payments received or debts paid in exchange	Date transfer was made					
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-programs) No Yes. Fill in the details.		ny property to a self	-settled trust or similar devic	e of which you are a					
	Name of trust	Description and v	alue of the propert	y transferred	Date Transfer was made					
Pai	18: List of Certain Financial Accounts, In	struments, Safe Deposi	t Boxes, and Storag	ge Units						
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No									
	Yes. Fill in the details.									
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account of instrument	or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer					
21.	Do you now have, or did you have within 1 cash, or other valuables? No Yes. Fill in the details.	year before you filed for	r bankruptcy, any sa	afe deposit box or other depo	ository for securities,					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		scribe the contents	Do you still have it?					
22.	Have you stored property in a storage unit		r home within 1 yea	r before you filed for bankru	otcy?					
	■ No □ Yes. Fill in the details.									
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or l to it? Address (Number, S State and ZIP Code)		Do you still have it?						

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Debtor 1 Samantha E Carrillo

Par	19: Identify Property You Hold or Control for	Someone Else					
23.	23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.						
	■ No						
	Yes. Fill in the details.	December the management	Walne				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value			
Par	t 10: Give Details About Environmental Inform	ation					
For	the purpose of Part 10, the following definitions	apply:					
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul	ir, land, soil, surface water, groun	- ·				
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	•	law, whether you now own, operate,	or utilize it or used			
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or	mental law defines as a hazardous	s waste, hazardous substance, toxic	substance,			
Rep	ort all notices, releases, and proceedings that ye	ou know about, regardless of whe	n they occurred.				
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	e under or in violation of an environm	ental law?			
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any	release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.						
	■ No						
	Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	111: Give Details About Your Business or Con	nections to Any Business					
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of the following connections to an	y business?			
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	nip (LLP)				
	☐ A partner in a partnership						
	☐ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the voting or	equity securities of a corporation					

Entered 06/09/16 16:37:08 Case 16-19089 Doc 1 Filed 06/09/16 Page 50 of 64 Document ase number (if known) Debtor 1 Samantha E Carrillo No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Samantha E Carrillo Signature of Debtor 2 Samantha E Carrillo Date June 9, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). ☐ Yes. Name of Person

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Fill in this informa	tion to identify your o	2250.			
Debtor 1	Samantha E Carri First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankı	ruptcy Court for the:	NORTHERN DIST	RICT OF ILLINOIS		
Coop number					
Case number				☐ Check if the amended	
Official Forn	n 108				
Statement	of Intention	n for Indiv	iduals Filing Under (Chapter 7	12/15
If you are an individ	dual filing under char	oter 7. vou must fill	out this form if:		
	laims secured by you	• •			
	l personal property a				
	er is earlier, unless the		ou file your bankruptcy petition or by time for cause. You must also send c		
	ole are filing together date the form.	in a joint case, bot	h are equally responsible for supplyin	g correct information. Both deb	tors must
Be as complete and	d accurate as possibl	le. If more space is	needed, attach a separate sheet to thi	s form. On the top of any additi	onal pages.
	a accarate ac peccio.				
	r name and case num	nber (if known).		, ,	, ,
write you		,		. ,	
Part 1: List Your 1. For any creditors	r name and case num r Creditors Who Have s that you listed in Pa	Secured Claims	Creditors Who Have Claims Secured	by Property (Official Form 106D	
Part 1: List Your 1. For any creditors information below	r name and case num r Creditors Who Have s that you listed in Pa	Secured Claims	,), fill in the
Part 1: List Your 1. For any creditors information below	r name and case num r Creditors Who Have s that you listed in Pa w.	Secured Claims	Creditors Who Have Claims Secured What do you intend to do with the pi	operty that Did you claim), fill in the
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Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor	1 Samantha E Carrillo	Case number (if known)
	's name:	□ No
Descrip Proper	otion of leased ty:	☐ Yes
	's name:	□ No
Descrip Proper	otion of leased ty:	☐ Yes
	's name: otion of leased	□ No
Proper		☐ Yes
	's name:	□ No
Proper	otion of leased ty:	☐ Yes
	's name:	□ No
Descrip Proper	otion of leased ty:	☐ Yes
Part 3:	Sign Below	
	penalty of perjury, I declare that I have indicated my y that is subject to an unexpired lease.	intention about any property of my estate that secures a debt and any personal
, <u> </u>	/ Samantha E Carrillo	X
	amantha E Carrillo gnature of Debtor 1	Signature of Debtor 2
Da	ate June 9, 2016	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-19089 Doc 1 Filed 06/09/16 Entered 06/09/16 16:37:08 Desc Main Document Page 57 of 64

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Samantha E Carrillo		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR DE	BTOR(S)
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(1) ompensation paid to me within one year before the filing e rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy	, or agreed to be paid t	o me, for services rendered or to
	For legal services, I have agreed to accept		\$	850.00
	Prior to the filing of this statement I have received		\$	850.00
	Balance Due		\$	0.00
2. T	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. T	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4. I	I have not agreed to share the above-disclosed compe	ensation with any other person	unless they are memb	ers and associates of my law firm.
[☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name			
5. I	n return for the above-disclosed fee, I have agreed to rer	nder legal service for all aspec	ts of the bankruptcy ca	ase, including:
b c	 Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of creditor [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hour 	ment of affairs and plan which rs and confirmation hearing, a educe to market value; ex- ns as needed; preparation	n may be required; nd any adjourned hear emption planning;	ings thereof; preparation and filing of
6. B	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc proceeding.			s or any other adversary
		CERTIFICATION		
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for	payment to me for re	presentation of the debtor(s) in
Ju	ıne 9, 2016	/s/ Joseph R. Do		
Do	nte	Joseph R. Doyle Signature of Attorno Bizar & Doyle, LI 123 West Madiso Suite 205 Chicago, IL 6060 312-427-3100 Fa joe@bizardoylela	2y LC on Street 2 ax: 312-427-5400	
		Name of law firm		

BICARY ON ORIGINA	de 1 - Fled 06709/16 - Entefe	d 96/09/16 18:37 98 Desc Main
SECURED DEBTS	UNSECTION UNDER TSPAGE 58	of 64NON-DISCHARGEABLE /
1 st Mortgage /Arrears	Dept to School !	Tayes
2 nd Mortgage /Arrears	Dept to select ,	Student Loans OC
Automobile #1 54/21	ar ar	Child Support
Automobile #2	, , ,	NSF
PMSI		Parking Tickets
Non-PMSI		Govt. Debt
Other	TOTAL	Other
TOTAL \$	TOTAL \$	<u>TOTAL</u> \$
Cosigned debt (Y/N) Wage assignment (Y/N) 722 Redemption (Y/N) HAPTER 7 - eliminates dischargea	Bank Account Setoff (Y/N) License suspended (Y/N) Motion to avoid lien (Y/N) ble unsecured debts.	Garnishment (Y/N) IRS Determination (Y/N) Judgment lien motion (Y/N)
HAPTER 7 ATTORNEY'S FEE ETAINER FEE \$ BALANCE **FILING FEE*** MONEY ORDER / THE CHAPTER 7 WILL NOT BE FILE	E \$ 500 PAYABLE in for (4) in CASHIER'S CHECK FOR \$335.00 PAY	(filing fee not included) istallments of \$ \(\frac{\mathcal{M}}{\mathcal{M}} \) before \(\frac{\mathcal{M}}{\mathcal{M}} \), plus ABLE TO THE BIZAR & DOYLE, LLC D IN FULL, INCLUDING THE FILING FEE
HAPTER 13 - debt consolidation p		9/12/
STIMATED Chapter 13 payment plan to		X (2-5)
	하고 아이들이 되었다. 그렇다는 것이 아이들은	10
formontl	hs, paying an estimated	6 to the unsecured, non-priority creditor claims.
CHAPTER 13 ATTORNEY'S FEE	\$	
oday you paid us \$ retainer	. Your balance is \$	
our PAYMENT PLAN: \$	before, plus <u>\$3</u> ER'S CHECK FOR PAYABLE TO THE BIZ	310.00 for the filing fee. AR & DOYLE, LLC)
EMAINING BALANCE of \$		hapter 13 Plan payments to the Trustee.
he above fee is for pre-confirmation work only. All post	t-confirmation work is billed at \$275.00 per hour.	The Chapter 13 payment above is just an estimate based on the
cords you have provided and is subject to change based one non-dischargeable debts could survive the Chapter		nd expenses or changes in state or federal law. Please be aware,
In fully disclose all financial information to BIZAR & DOYL at it is a Federal crime to omit a creditor or other informative last payment date. Attorney's advice to client is based on elated to changes in the law that affect client's ability to qual ny client delay should the law change. Pay in full immediative client. 3) STATE LAW PROCEEDINGS- Client mutatters and will not represent any bankruptcy client in ANY shows cause or any other civil or criminal lawsuits. Client is hooses to terminate BIZAR & DOYLE, LLC's services and ancellation. BIZAR & DOYLE, LLC's hourly rate is \$2700YLE, LLC as client's attorneys. After receiving written nearned attorneys fees paid to date. 5) COLLECTIONS-Inclient is liable for all attorney's fees and costs incurred to contitten request, certified mail, return receipt requested COUNSELING/FINANCIAL MANAGEMENT - Every contor to filing a bankruptcy Each client must take a financial lasses at: USE WWW.ACCESSBK.ORG Attorney crees for Amending Bankruptcy Schedules: \$230 to amend mitted. There is no charge to amend for a change of address filed. Client agrees to call BIZAR & DOYLE, LLC three BIZAR & DOYLE, LLC still has to appear at the hearing elischarge issue is \$275 per hour, ten hours to be paid in addischarge issue is \$275 per hour, ten hours to be paid in addischarge issue is \$275 per hour, ten hours to be paid in addient delays in paying the fees, returning the petition or in locuments of information. Avoiding Liens/ Redemptions-ngainst real estate, (\$550), avoiding non-purchase and prior to BIZAR & DOYLE, LLC drafting such motion. he lien will survive the bankruptcy. Client acknowledges the balk payor. Client acknowledges the balk payor work on different aspects of client's case.	E, LLC. Client must disclose all assets and all debts ton from a bankruptcy petition. 2) TIMELY PAYN current applicable Local, State and Federal laws. Gify for bankruptcy relief or to discharge debts within ely so BIZAR & DOYLE, LLC can file client's case at personally appear at any and all state court procestate law matter, including, but not limited to, divore a divised to attend all state court proceedings, unless it representation at any time; client is only entitled to? 5 per hour for purposes of determining what refun notice, BIZAR & DOYLE, LLC will take approxing BIZAR & DOYLE, LLC is unable to collect its fee flect the debt, including court costs. 6) RESCISSIO, to BIZAR & DOYLE, LLC no less than eleient must receive credit counseling from an "approxial management course within 45 days of the 1st day ode-BD15131. 8) ADDITIONAL FEES- In addid client's petition once the case is filed to add adds. Missing court date or 341 meeting. Client must be weeks after client's case has been filed to obtain the tree if client does not and will charge \$200 additior at a settlement is approximately \$350 to be paid in advance. Delays- BIZAR & DOYLE, LLC reserves the providing information to BIZAR & DOYLE, LLC, Client agrees that the above quoted fee does not include the content of the second of the second of the content of the second of the second of the second of the content of the second of the second of the content of the second of the secon	EY AND FILING FEES). 1) FULL DISCLOSURE- Client agrees a regardless of client's intentions to repay such debts and understands MENT/LAW CHANGES - Client agrees to pay fees in full prior to client agrees to hold BIZAR & DOYLE, LLC harmless for damages a bankruptcy case. BIZAR & DOYLE, LLC harmless for damages a bankruptcy case. BIZAR & DOYLE, LLC are not responsible for cor risk that court rulings and law changes could alter the advice we edings. BIZAR & DOYLE, LLC does not represent client in these e proceedings, contempt hearings, citation to discover assets, rules to a refund of uncarned fees. Client must submit a written request of a client is entitled to in the event that client discharges BIZAR & mately 45 days to do an accounting and issue a refund check of any as pursuant to this contract, we will refer your account to collections. PNS-Client may only rescind a reaffirmation agreement by sending a 15 days prior to the bar date for rescissions. 7) CREDIT wed nonprofit budget and credit counseling agency" within 180 days te set for your Section 341 meeting of creditors hearing. Take the lition to all court costs and filing fees, client agrees to pay additional itional creditors and/or to list additional assets that were previously st attend a §341 meeting approximately four weeks after client's case as \$341 meeting date if client has not received notice of the meeting. Take the right to charge a minimum of \$150 for additional fees due to any including appraisals, proof of insurance, titles or any other requested ude the following additional fees for services to avoid judgment liens mptions on vehicles (\$600) These additional fees are to be of pay the fee, BIZAR & DOYLE, LLC's fee for litigating a he right to charge a minimum of \$150 for additional fees are to be of pay the fee, BIZAR & DOYLE, LLC will not bring the motion and tion to reopen a closed bankruptcy case- Client agrees to pay \$375 rged. Bounced checks-Client agrees to pay a \$30 bounced check fee PRACTICE/CO-COUNSEL- Client understands t
Signature X	\mathcal{U} DATE X	DATE
WI WILLIAM TO	A .	:



CINI Account A						
CIN Account N	unner	•			**********	
Account Nam	2:	***************************************				
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SUBJECT TO THE TERMS, CONDITIONS AND DISCLOSURES SET OUT ON PAGES 2 AND 3 HEREIN, I INSTRUCT AND AUTHORIZE CIN LEGAL DATA SERVICES ("CIN") TO DO THE FOLLOWING (PLEASE SELECT ALL THAT APPLY): Bankruptcy Credit Report™ Access my Credit Profile one time to compile, merge, and format the credit data and data elements into the Bankruptcy Credit Report ("BCR"); provide a copy of the BCR to my attorney via CIN's Internet portal or other secure electronic means; make data elements of the BCR available for electronic import into my attorney's bankruptcy forms preparation software program or automated bankruptcy filing system; and provide a copy of the BCR to me via electronic posting to my secure MyHorizon® account. Credit Assurance Report™ Access my Credit Profile one time in the 60 to 90 days following the discharge of my bankruptcy case to compile, merge, and format the credit data and data elements into the Credit Assurance Report™ ("CAR"); provide a copy of the CAR to my attorney via CIN's Internet portal or other secure electronic means; and provide a copy of the CAR to me via posting to my secure MyHorizon® account. Access my Credit Profile daily for 12 months beginning on the date the MyHorizon MyHorizon® Credit Monitoring Program Credit Monitoring Program ("MHT Monitoring") is ordered to provide credit monitoring, credit scoring, and/or credit score monitoring and tracking products to me via email, instant message, and/or text message. X Identity Verification Access my Credit Profile one time on the order date of any BCR, CAR or MHT Monitoring product to confirm my identity and avoid fraudulent transactions in my name. THIS IS A REQUIREMENT FOR ANY CREDIT PRODUCT ORDER.

PLEASE SUBMIT COMPLETED FORM WITH PHOTO IDS FOR PRIMARY APPLICANT AND CO-APPLICANT (IF JOINT APPLICATION) BY FAX TO 866-307-1003 OR BY EMAIL TO FORMS@CINLEGAL.COM. THANK YOU.

PRIMARY APPLICANT NAME SSN SIGNATURE DATE	Photo ID
CO- APPLICANT (IF JOINT APPLICATION) NAME SSN SIGNATURE DATE	Photo ID

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Samantha E Carrillo		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENSATION	ON OF ATTORNEY	FOR DI	EBTOR(S)
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certiformpensation paid to me within one year before the filing of the perendered on behalf of the debtor(s) in contemplation of or in cort	etition in bankruptcy, or agre	ed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		S	850.00
	Prior to the filing of this statement I have received		3	850.00
	Balance Due		S	0.00
2. 7	he source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. 7	he source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4. l	■ I have not agreed to share the above-disclosed compensation w	ith any other person unless t	hey are mem	bers and associates of my law firm.
5.]	I have agreed to share the above-disclosed compensation with copy of the agreement, together with a list of the names of the in return for the above-disclosed fee, I have agreed to render legal. Analysis of the debtor's financial situation, and rendering advice. Preparation and filing of any petition, schedules, statement of a	people sharing in the compe- service for all aspects of the e to the debtor in determinin ffairs and plan which may be	bankruptcy of whether to required;	ached. case, including: file a petition in bankruptcy;
Ċ	 Representation of the debtor at the meeting of creditors and cord. [Other provisions as needed] Negotiations with secured creditors to reduce to reaffirmation agreements and applications as ne 522(f)(2)(A) for avoidance of liens on household. 	market value; exemptio eded; preparation and fi goods.	n planning ling of mot	; preparation and filing of
6. I	By agreement with the debtor(s), the above-disclosed fee does not Representation of the debtors in any dischargeal proceeding.	include the following service bility actions, judicial lie	: n avoidand	es or any other adversary
	CERTI	FICATION		
this b	certify that the foregoing is a complete statement of any agreement ankruptcy proceeding. 5 - () - (6)	Joseph R. Doyle 627900 Signature of Attorney Bizar & Poyle, LLC 123 West Madison Stree Suite 205 Chicago, IL 60602 312-427-3100 Fax: 312	65 et	representation of the debtor(s) in

Name of law firm

United States Bankruptcy Court Northern District of Illinois

In re	Samantha E Carrillo		Case No.	
		Debtor(s)	Chapter 7	
	VE	RIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	25
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	tors is true and correct to th	ne best of my
Date:	June 9, 2016	/s/ Samantha E Carrillo Samantha E Carrillo Signature of Debtor		

Alliance One 4850 Street rd Ste 300 Feasterville Trevose, PA 19053

Amex P.o. Box 981537 El Paso, TX 79998

Bk Of Amer 4161 Piedmont Pkwy Greensboro, NC 27410

Blitt & Gaines 661 Glenn Ave Wheeling, IL 60090

Cach Llc 4340 S Monaco, Second Floor Denver, CO 80237

Center of Brain and Spine Surgery 1875 W Dempster Suite 410 Park Ridge, IL 60068

Central Credit Services PO Box 15118
Jacksonville, FL 32239

Chase Card Po Box 15298 Wilmington, DE 19850

Comenity PO Box 182273 Columbus, OH 43218-2273

Dept Of Ed/navient Po Box 9635 Wilkes Barre, PA 18773

Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850 Elmhurst Memorial Healthcare 27535 Network Place Chicago, IL 60673

Hyundai Capital Americ 4000 Macarthur Blvd Ste Newport Beach, CA 92660

Joseph Mann & Creed 8948 Canyon Falls Blvd Suite 200 Twinsburg, OH 44087

Lora Pacian 9307 Irving Park Rd Schiller Park, IL 60176

Mandarich Law Group LLP 1 N Dearborn Suite 650 Chicago, IL 60602

Med Busi Bur 1460 Renaissance Dr Park Ridge, IL 60068

Merchants Credit Guide 223 W Jackson Blvd Ste 4 Chicago, IL 60606

Midland Funding 2365 Northside Dr Ste 30 San Diego, CA 92108

Portfolio Recovery Ass 120 Corporate Blvd Ste 1 Norfolk, VA 23502

Synchrony Bank/HHGregg PO Box 960061 Orlando, FL 32886

T-Mobile PO Box 53410 Bellevue, WA 98015-3410 Td Bank Usa/targetcred Po Box 673 Minneapolis, MN 55440

Victoria's Secret Bankruptcy Department PO Box 182125 Columbus, OH 43218

Weltman, Weinberg & Reis Co 180 N LaSalle St, Suite 240 Chicago, IL 60601